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	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application of Docket Number 10 1777,930		
AAN S F	CLAIMS AS FILED - PART I (Column 1) (Column 2)				lumn 2)		SMALL E	ENTITY	OR	OTHEF SMALL	R THAN ENTITY
	FOR	NUMBER	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE
	BASIC FEE (37 CFR 1.16(a))							\$	OR		\$
169/05	TOTAL CLAIMS (37 CFR 1.16(c))	321	32/ minus 20 =				x \$=		OR	x \$=	
	INDEPENDENT CL (37 CFR 1.16(b))		minus 3 =				x \$=		OR	x \$=	
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					1 1	+\$ =		OR	+\$ =	
	* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL	
	CLAIMS AS AMENDED - PART II										
	AWE Column 1) (Column 2) (Column 3)						SMALL E	NTITY	OR	OTHER SMALL	
	ENTA	CLAIMS REMAINING AFTER AMENDMENT	PR	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	(37 CFR 1.16(c))	1.15	Minus **	32			x \$=		OR	X \$=	
	Z independent (37 CFR 1.16(b))	'3	Minus ***	4	=		x s=		OR	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$=		OR	+ \$=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)	_				•	
	B .	CLAIMS REMAINING AFTER AMENDMENT	PR	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus **		=	lĺ	x \$=		OR	x \$=	
	Total (37 CFR 1.18(c)) Independent (37 CFR 1.18(b)) Total (37 CFR 1.18(b))	*	Minus ***		=		x \$=		OR	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$=		OR	+ \$ =	
180 S 12							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)	(Column 2)	(Column 3)		•			•	
	U L U	CLAIMS REMAINING AFTER AMENDMENT	PR	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))		Minus **		=		x \$=		OR	x \$=	
	Total (37 CFR 1.16(c)) Independent (37 CFR 1.16(b))		Minus ***		=		x \$=		OR	x \$=	`
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$=		OR	+ \$=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. 										

The "Highest Number Previously Paid For" (Lotal or Independent) is the nignest number found in the appropriate box in column in the appropriate box in column in the suppropriate box in on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.